



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09 653,149	08/31/2000	Garo J. Derderian	MI22-1330

021567
WELLS ST JOHN ROBERTS GREGORY AND MATKIN
SUITE 1300
601 W FIRST AVENUE
SPOKANE, WA 992013828



FORMALITIES LETTER



OC00000005483719

Date Mailed: 11/16/2000

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given TWO MONTHS from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 130.

*A copy of this notice **MUST** be returned with the reply.*

[Signature]

Customer Service Center

Initial Patent Examination Division (703) 308-1202

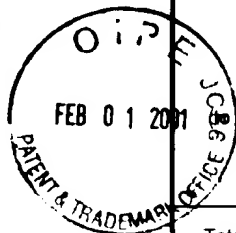
PART 2 - COPY TO BE RETURNED WITH RESPONSE

Section 81

Please type a plus sign (+) inside this box → ☐

PTO/SB/21 (6-98)
Approved for use through 09/30/2000. OMB 0651-0031
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



TRANSMITTAL FORM

to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number

09/653,149

Filing Date

August 31, 2000

First Named Inventor

Garo J. Derderian

Group Art Unit

2812

Examiner Name

Unassigned

Attorney Docket Number

MI22-1330

ENCLOSURES (check all that apply)

☒ Fee Transmittal Form

☒ Fee Attached

☐ Amendment / Response

☐ After Final

☐ Affidavits/declaration(s)

☒ Extension of Time Request

☐ Express Abandonment Request

☐ Information Disclosure Statement

☐ Certified Copy of Priority Document(s)

☒ Response to Missing Parts/ Incomplete Application

☒ Response to Missing Parts under 37 CFR 1.52 or 1.53

☒ Assignment Papers (for an Application)

☐ Drawing(s)

☐ Licensing-related Papers

☐ Petition Routing Slip (PTO/SB/69) and Accompanying Petition

☐ Petition to Convert to a Provisional Application

☒ Power of Attorney, Revocation Change of Correspondence Address

☐ Terminal Disclaimer

☐ Small Entity Statement

☐ Request for Refund

☐ After Allowance Communication to Group

☐ Appeal Communication to Board of Appeals and Interferences

☐ Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)

☐ Proprietary Information

☐ Status Letter

☒ Additional Enclosure(s) (please identify below):

PTO return receipt postcard
Check in the amount of \$150.00
Check in the amount of \$130.00
Copy of Notice to File Missing Parts
Executed Declaration

Remarks

Customer No. 021567

The Commissioner is hereby authorized to charge any additional fees required under 37 CFR Sections 1.16 and 1.17 and credit any overpayments to: 23-0925.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name

James E. Lake

Signature

Date

29 Jan 2001

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 01/29/2001

Typed or printed name Rebecca Joyce

Signature

Date

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL
for FY 1999

Patent fees are subject to annual revision.

Small Entity payments must be supported by a small entity statement.
Otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

TOTAL AMOUNT OF PAYMENT (\$280.00)

Complete if Known

Application Number	09/653,149
Filing Date	August 31, 2000
First Named Inventor	Garo J. Derderian
Examiner Name	Unassigned
Group / Art Unit	2812
Attorney Docket No.	MI22-1330

METHOD OF PAYMENT (check one)

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 23-0925
 Deposit Account Name Wells, St. John

- ☒
- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

- 2.
- ☒
- Payment Enclosed:
-
- ☒
- Check
- ☐
- Money Order
- ☐
- Other

FEE CALCULATION**1. BASIC FILING FEE**

Large Fee Code	Small Fee Code	Fee Description	Fee Paid
101	760 201 380	Utility filing fee	
106	310 206 155	Design filing fee	
107	480 207 240	Plant filing fee	
108	760 208 380	Reissue filing fee	
114	150 214 75	Provisional filing fee	

SUBTOTAL (1) (\$ 0.00)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
20**			0.00
3**			0.00
Multiple Dependent			0.00

**or number previously paid, if greater; For Reissues, see below

Large Fee Code	Small Fee Code	Fee Description	Fee Paid
103	18 203 9	Claims in excess of 20	
102	78 202 39	Independent claims in excess of 3	
104	260 204 130	Multiple dependent claim, if not paid	
109	78 209 39	** Reissue independent claims over original patent	
110	18 210 9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$ 0.00)

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Fee Code	Small Fee Code	Fee Description	Fee Paid
105	130 205 65	Surcharge - late filing fee or oath	130.00
127	50 227 25	Surcharge - late provisional filing fee or cover sheet	0.00
139	130 139 130	Non-English specification	0.00
147	2,520 147 2,520	For filing a request for reexamination	0.00
112	920* 112 920*	Requesting publication of SIR prior to Examiner action	0.00
113	1,840* 113 1,840*	Requesting publication of SIR after Examiner action	0.00
115	110 215 55	Extension for reply within first month	110.00
116	380 216 190	Extension for reply within second month	0.00
117	870 217 435	Extension for reply within third month	0.00
118	1,360 218 680	Extension for reply within fourth month	0.00
128	1,850 228 925	Extension for reply within fifth month	0.00
119	300 219 150	Notice of Appeal	0.00
120	300 220 150	Filing a brief in support of an appeal	0.00
121	260 221 130	Request for oral hearing	0.00
138	1,510 138 1,510	Petition to institute a public use proceeding	0.00
140	110 240 55	Petition to revive - unavoidable	0.00
141	1,210 241 605	Petition to revive - unintentional	0.00
142	1,210 242 605	Utility issue fee (or reissue)	0.00
143	430 243 215	Design issue fee	0.00
144	580 244 290	Plant issue fee	0.00
122	130 122 130	Petitions to the Commissioner	0.00
123	50 123 50	Petitions related to provisional applications	0.00
126	240 126 240	Submission of Information Disclosure Stmt	0.00
581	40 581 40	Recording each patent assignment per property (times number of properties)	40.00
146	760 246 380	Filing a submission after final rejection (37 CFR 1.129(a))	0.00
149	760 249 380	For each additional invention to be examined (37 CFR 1.129(b))	0.00
Other fee (specify) _____			0
Other fee (specify) _____			0.00

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 280.00)

SUBMITTED BYTyped or Printed Name James E. LakeSignature [Signature]Date 29 Jan 01**Complete (if applicable)**Reg. Number 44,854

Deposit Account User ID _____

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.